249710

(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo Application for Request for Cancellation of Certificate Class C Non-Emergency) BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET NUMBER: 2012 - 49 - T	
(Pies) If this is your fir) have a Docket N	st time filing an application with the PSC, you will not fumber. The Commission will assign one to you. If you he Commission before, a Docket Number was assigned
(Please type or print Submitted by:		Barbara Cooper	Telephone: (843) 598-5138	
Address:		P.O. Box 1207, change to	Fax:	n/a
		214 Holly Street	Other: Email:	n/a
		Lake City SC 29560 neet and information contained herein neither replace		cooper4trans@yahoo.com
	***************************************	NATURE OF ACTIO	N (Check all tha	nt apply)
	Application -	- Class C Taxi		Request to Amend Scope of Authority
	Application -	- Class C Charter		Request to Amend Tariff (rate increase, etc.)
	Application -	- Class C Charter Bus		Request to Amend Passenger Limit
	Application -	- Class C Non-Emergency		Request
	Application -	- Class E Household Goods		Exhibit
	Application -	- Class E Hazardous Waste		Late-Filed Exhibit
	Application			Letter
	Request for I	Extension to Comply with Order		Proposed Order
		Order Granting Authority to Obtain Certificate enience and Necessity to Be Rescinded	of \square	Publisher's Affidavit
	Request for C	Cancellation of Certificate		Reservation Letter
	Request for S	Suspension		Response
	Request for F	Reinstatement		Return to Petition
\Box	Request for N	Jame Change on Certificate	<u></u>	Other: O/A

24600

Request for Cancellation of Certificate

2012-49-T

File the original with: Public Service Commission of South Carolic Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815	
DATE: 3-25-2014		
Please consider this a request to cancel	my:	
Class C Taxi Certificate	Class A Restricted Certificate	
Class C Charter Certificate		
Class C Charter Bus Certificate		
Non-Emergency Certificate	RIP	
Class E Household Goods Certifica	R POTENTIAL TO THE MARKET OF THE	
Class E Hazardous Wastes Certific		
My Certificate Number is 8581	ate GLEF('S OFFICE	
D&B COOPER TRANS SERVICE	DBA	
(Name of Company)	(If applicable)	
435 SOUTH MORRIS STREET LOT 18	P.O.BOX 1207	
(Street Address)	(Mailing Address if different from Street Address)	
LAKE CITY SC 2	LAKE CITY SC 29560	
(City, State, Zip Code)	(City, State, Zip Code)	
(843) 598-5138		
(Telephone Number)	Barbara Ooper (Signature)	
	OWNER	
	(Title) Owner, President, etc.	